

# U.S. Fish and Wildlife Service

## Request for Exception to Cost Recovery Policy

Date: \_\_\_\_\_

Requesting Organization: \_\_\_\_\_

Regional/Program Contact: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Cooperator Name: \_\_\_\_\_

Cost Structure(s): \_\_\_\_\_

Total Agreement Amount: \_\_\_\_\_

Total Exemptions (see Cost Study): \_\_\_\_\_

Project Description:

Exception Justification:

### **REGIONAL APPROVAL:**

(Not required for Washington Office  
requests)

\_\_\_\_\_  
**Program ARD**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**ARD/Budget & Administration**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Regional Director**

\_\_\_\_\_  
**Date**

Exception to Policy Approved: YES or NO

Applicable Rate:            %

Approval/Disapproval Justification:

**WASHINGTON APPROVAL:**

\_\_\_\_\_  
Chief, Division of Finance                      Date

\_\_\_\_\_  
Chief, Division of Budget                      Date

\_\_\_\_\_  
Assistant Director - Budget, Planning & Human Resources

\_\_\_\_\_  
Date

\_\_\_\_\_  
Assistant Director - Business Management & Operations

\_\_\_\_\_  
Date

\_\_\_\_\_  
Assistant Director - Programmatic

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director, U.S. Fish and Wildlife Service

\_\_\_\_\_  
Date

## Exception to Service Policy Cost Study

### 1. Total Direct Costs

\$

#### Indirect Costs (Contact the Division of Finance for Assistance)

Office Space \$  
Telephone  
Postage  
Printing  
Accounting System  
Payroll/Personnel System  
Procurement System  
Worker's Compensation  
Unemployment  
Regional Program Support  
Headquarters' Program Support  
Regional Administration  
Headquarters' Administration

### 2. Total Indirect Costs

\$

Proposed Exemptions \$

### 3. Total Exemptions

(\$

)

### 4. Adjusted Indirect Costs (Line 2 minus Line 3)

\$

**Full Cost  
Recovery Rate**  
(Line 2 divided by Line 1)

**Proposed Cost  
Recovery Rate**  
(Line 4 divided by Line 1)